

SCT Ambulance Equipment List July 1, 2024

This equipment list is not intended to provide a complete description of every item required by COMAR 30.09

Service: _____

Fleet ID: _____

Location: _____

Inspector: _____

| Line #: | No. of Items | Description | Pass | Fail | Notes |
|-------------------------------|--------------|---|------|------|-------|
| ** | | All ALS ambulance licensure requirements must be met including any approved OSP's. | | | |
| Infusion Pumps | | | | | |
| 1 | 4 | infusion pumps | | | |
| 2 | 6 | infusion pump tubing sets | | | |
| 3 | 4 | extension sets | | | |
| 4 | 4 | stopcocks | | | |
| 5 | 2 | blood infusion sets | | | |
| 6 | 2 | intravenous filters | | | |
| Ventilator | | | | | |
| 7 | 1 | ventilator minimally capable of the following settings: | | | |
| | | oxygen concentration between 20% - 100% | | | |
| | | peak pressures between 0 and 99 | | | |
| | | selectable intermittent mandatory ventilation (IMV) | | | |
| | | positive end expiratory pressure between 2 and 15 | | | |
| | | adjustable ventilatory rated between 0 and 60 per minute | | | |
| | | adjustable tidal volumes: | | | |
| | | adults: 300ml - 1,000ml | | | |
| | | pediatric: 15mg - 200ml | | | |
| | | adjustable high and low pressure alarms | | | |
| 8 | 2 | ventilator circuits | | | |
| Cardiac Monitor | | | | | |
| 9 | 1 | cardiac monitor capable of monitoring: | | | |
| | | invasive blood pressure | | | |
| | | ETCO2 with waveform display & oxygen saturation | | | |
| Adult Transports | | | | | |
| 10 | 1 | surgical crichthyotomy kit | | | |
| 11 | 1 | needle crichthyotomy kit | | | |
| 12 | 2 | surgical clamps capable of clamping a minimum of a 40F chest tube or Foley | | | |
| Pediatric Transports | | | | | |
| 13 | | 500mL of D5 Normal Saline or Normal Saline maintenance fluid | | | |
| 14 | 6 | 1cc syringes | | | |
| 15 | 1 | surgical crichthyotomy kit | | | |
| 16 | 1 | needle chrichthyotomy kit | | | |
| Temperature Monitoring | | | | | |
| 17 | 1 | device to monitor induced hypothermia | | | |
| 18 | 1 | electric thermometer | | | |
| 19 | 1 | device to monitor core temperature (rectal or esophageal) | | | |
| Medications | | | | | |
| 20 | | all additional medications approved for use by the specialty care service Medical Director to meet the needs of the patients being transported | | | |
| 21 | | a current list of all approved medication must be available on each ambulance when used as SCT | | | |
| 22 | | sufficient quantities of medications shall be present to care for on adult for the longer of one hour or two times the estimated transport time | | | |